South Dakota Diabetes 2007-2009 State Plan

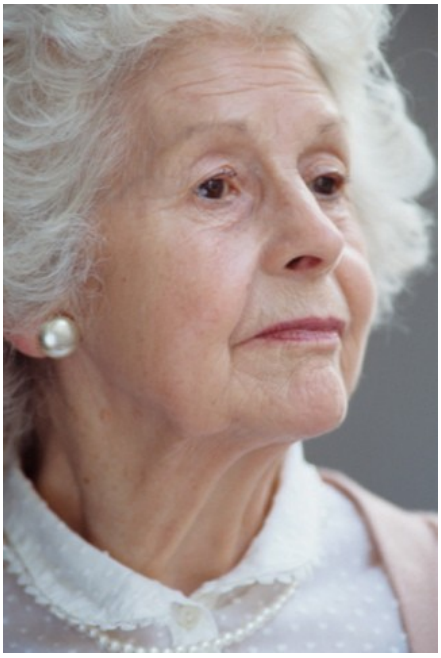
2007-2008 Progress Report

South Dakota Diabetes Coalition

This report is based upon epidemiological data, the South Dakota Diabetes 2007-2009 State Plan and the prioritization of those plan strategies according to a statewide survey of the South Dakota Diabetes Coalition and South Dakota Diabetes Advisory Council.

For more information or to obtain a copy of the plan, contact the South Dakota Department of Health at (605) 773-3737 or refer to *http://diabetes.sd.gov.*

Burden of Diabetes



According to current statistics, 6.7% of the adult population of South Dakota, 39,344 people, have been diagnosed with diabetes. In addition, national estimates indicate that about 25% of people with diabetes do not know they have it meaning an additional 13,115 South Dakotans are likely to have undiagnosed diabetes. In 2006, 7.1% of South Dakota's pregnant women developed gestational diabetes. The number of cases of gestational diabetes and type 2 diabetes is increasing. Approximately 1,000 children and adolescents under the age of 18 have diabetes, with the vast majority of they having type 1 diabetes.

In addition, the last few decades have seen the number of overweight and obese people increasing which puts South Dakotans at an increased risk for type 2 diabetes, heart disease, and other chronic diseases. Among South Dakota adults, 38.3% are overweight (Body Mass Index 25 to 29.9) and 27.2%were obese (Body Mass Indexes 30 and above). The trend of increasing BMIs is seen in South Dakota's children as well.

Native Americans in South Dakota experience a greater burden from diabetes, with 11% of adults diagnosed with diabetes. They also have a younger age of death than Whites, 66 years versus 80 years respectively. For more information, see The Burden of Diabetes in South Dakota at http://diabetes.sd.gov. This report accomplishes **Strategy 1.1 - *Prepare and disseminate an epidemiology report outlining trends of available indicators***.

South Dakota Diabetes Coalition

The SDDC was formed in October 2005. Its members are from across South Dakota with a mission to "partner together to improve health outcomes of those affected by diabetes in South Dakota". Four focus areas have been identified:

Patient Education: This group actively seeks to provide patient education through the promoting of quality education programs, products, and practice.

Professional Education: This group actively seeks to improve access to quality health care professional diabetes-related education that is accurate, relevant, and timely.

Advocacy: This group actively seeks to support the concerns of diabetes prevention and control through encouragement of policy and cultural milieu changes to protect the interests of individuals, families, and related persons and organizations.

Public Awareness: This group actively seeks to increase levels of consciousness about how persons may reduce their risk of diabetes, manage their diabetes more effectively, or prevent the long-term complications of diabetes.

The SDDC works to bring to the table individuals and entities that can impact the quality of diabetes care and education. The coalition in this way fulfills **Strategy 7.1 - *Facilitate partnerships for the integration and sustainability of diabetes care in South Dakota.***

The SDDC held its Partners' Conference in September. This completes **Strategy 4.2 *Convene two "Partners' Conferences" to facilitate continued collaboration among partner organizations.***

Partnerships in Action

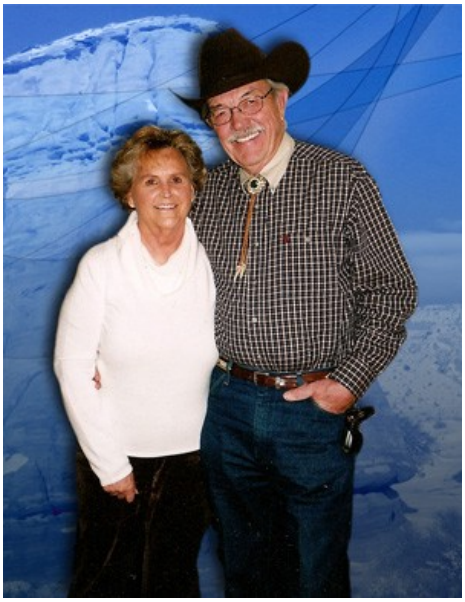
A huge **Thank You** goes to the Wellmark Foundation which granted $107,500 to the SD Department of Health Diabetes Prevention & Control Program (DPCP) in support of its work to improve the capability and capacity of the statewide health system to reduce the burden of diabetes and improve the quality of life for all persons affected by diabetes in South Dakota. Significant progress on the strategic plan and the SDDC would not have been possible without the funds.

Two culturally-appropriate television Public Service Announcements (PSAs) were developed and financed by SDDC partner SD Public Broadcasting (SDPB) with other members' input. One PSA urges people to seek screening if they are at risk for diabetes. The other PSA encourages people with diabetes to become knowledgeable and control their diabetes. Both PSAs are available from SDPB for run in SD communities by contacting Bob Bosse at 677-6267.

Another partner, Communication Service for the Deaf (CSD), created 8 thirty-second PSAs in sign language with voice and open captions for people with diabetes. Contact Judy Morgan at (800) 642-6410 about accessing these PSAs. This work accomplishes **Strategy 3.4 - *Develop at least 1 diabetes-focused public service announcement*.**

SDPB also facilitated diabetes as the focus of its November 15, 2007 episodes of "On Call" and "SD Focus". This accomplished the 07 goal of **Strategy 4.4 *- Develop a partnership with South Dakota Public Broadcasting's "South Dakota Focus" to dedicate an episode to diabetes each year*.**

For SDDC members interested in providing diabetes awareness and education to the public through interactive displays and educational sessions, the SDDC has developed and will continue to expand a resource library. It contains displays, books, and diabetes-related models. This is progress on **Strategy 3.8 - *Promote us of the professional and public diabetes awareness displays to agencies conducting diabetes and pre-diabetes awareness programs***. These resources have been used in multiple health fairs and educational programs and are available from SDDC coordinator Melissa Magstadt (magstadm@gmail.com). Other resources such as the South Dakota Diabetes Coalition-specific information, educational materials, and an Events Calendar are posted on the DPCP website at http://diabetes.sd.gov. This accomplishes **Strategy 3.1 - *Add sections to (the DPCP) web site to serve as a central point to promote available information and educational resources***.



South Dakota State of Diabetes Care 2007

Based on the DPCP's three current focus areas: 1) Dissemination of credible information, 2) Linkages within the statewide diabetes public health system, and 3) Surveillance of data and trends, the DPCP's mission statement – "to collaborate with partners to design, implement, and evaluate a broad range of public health strategies to reduce the burden of diabetes and improve the quality of life for all persons affected by diabetes in South Dakota" remains appropriate. Thus **Strategy 5.2 - *Review and update the mission statement of the SD Department of Health Diabetes Prevention & Control Program*** was accomplished.

A multitude of SDDC members including the Mount Rushmore Chapter of Diabetes Educators (MRCDE), the SD Nurses Association, and the SD School Nurses Association collaborated to monitor and respond to 3 bills with a potential impact on people with diabetes. **Strategy 6.1 - *Monitor for legislation related to services for individuals with diabetes*** was thus accomplished during 2008 legislative session .

Partners including MRCDE, the DPCP, and the University of SD Sanford School of Medicine Office of CME coordinated numerous continuing education opportunities. These ongoing efforts accomplish **Strategies 8.4 - *Provide an educational conference targeting healthcare professionals who provide education and treatment to those with diabetes*** **and 8.5 - *Identify partnerships for continuing education related to diabetes***. Online and web-based opportunities are posted on the Continuing Education section at http://diabetes.sd.gov and realize **Strategy 8.1 - *Post a continuing education program list on the SD Department of Health web site***.

As the body of research and understanding regarding diabetes grows, the foundation of and need to use evidence-based health care increases. Data shows people with diabetes receive care and education at varied levels of competency. To this end, the DPCP, in collaboration with the South Dakota Foundation for Medical Care, numerous providers, and systems including the Avera McKennan, Rapid City Regional, Sanford, and CHAD (Community Healthcare Association of the Dakotas) developed and disseminated the Recommendations for Management of Diabetes in South Dakota. The Recommendations are succinct but comprehensive guidelines that utilize evidence-based practice to assist providers in delivering appropriate care and treatment to people at-risk-for and with diabetes. This is one way **Strategy 7.4 - *Use evidence-based practice to support quality care to vulnerable populations*** is being affected.

University Partners in Health Promotion (UPHP) is an interdisciplinary group of faculty members from South Dakota State University and the University of South Dakota that designs, implements, tests, and evaluates health programs and health services. UPHP has been working since July 2007 to accomplish strategies in the South Dakota Diabetes State Plan 2007-2009 (http://diabetes.sd.gov). The final report on this work, Implementation of the SD Strategic Plan 5-30-08, is available at http://doh.sd.gov/Diabetes/Coalition/default.aspx. Work completed through May 2008 includes:

- Revise the SD Diabetes Information Link program enrollment cards to distinguish enrollees by age, type of diabetes and ethnicity (**Strategy 3.7**). *Status:* New "Link" cards are currently being printed.
- Identify barriers to diabetes care and develop strategies to eliminate or lessen these barriers (**Strategy 7.2**).
- Identify existing diabetes curriculum for school of medicine, nursing, pharmacy, and dietetics in SD and compare curriculum contents of the American Diabetes Association Standards of Care and identify gaps (**Strategies 8.2 and 8.2.1**).
- Assess the availability of specialty care for individuals with diabetes in SD and identify geographically underserved areas (**Strategy 9.1**). *Status:* Final report about 7.2, 8.2, 8.2.1 and 9.1 available at http://doh.sd.gov/Diabetes/Coalition/default.aspx.
- Establish a central depository of information about diabetes-related research being undertaken in SD (**Strategy 10.1**) and maintain a list of collaborative partnerships for diabetes research across the state, to include researchers, communities, organizations, and funding sources (**Strategy 10.2**). *Status:* Final report at http://doh.sd.gov/Diabetes/research.aspx.

For further information about the SDDC and to become a member, contact Melissa Magstadt, SDDC Coordinator at magstadm@gmail.com or 605-882-9853.

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